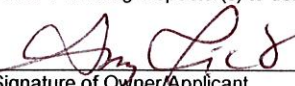
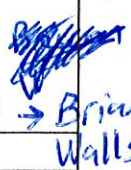


PLUMBING APPLICATION		Department of Health and Human Services Division of Environmental Health	
PROPERTY ADDRESS		Town/City _____ Permit # _____	
Town or Plantation <u>Lamoine</u>		Date Permit Issued <u> </u> / <u> </u> / <u> </u> Fee: \$ _____ Double Fee Charged [<input type="checkbox"/>]	
Street or Subdivision Lot # <u>475 Lamoine Beach Road</u>		Local Plumbing Inspector Signature _____ L.P.I. # _____	
PROPERTY OWNER(S) NAME		Fee: \$ _____ State min. fee \$ _____ Locally adopted fee _____	
Last: <u>RICHARDS</u> First: <u>AMY</u>		Copy: (<input type="checkbox"/>) Owner (<input type="checkbox"/>) Town (<input type="checkbox"/>) State (<input type="checkbox"/>) Map # _____ Lot # _____	
Applicant Name: <u>Richards, Amy</u>		The Internal Plumbing Fixtures and Piping shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the plumbing system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules.	
Mailing Address of Owner/Applicant (if Different) <u>87 PARTRIDGE AVE RD LAMOINE ME 04645</u>			
Owner/Applicant Statement			
I certify that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Local Plumbing Inspector(s) to deny a permit.		Caution: Inspection Required	
 <u>3/13/2020</u> Signature of Owner/Applicant Date		I have inspected the installation authorized above and found it to be in compliance with the Maine Plumbing Rules Application.	
		Date Approved (Rough-in) _____ Date Approved (Final) _____	
		LPI Signature _____	
PERMIT INFORMATION			
This Application is for		Type of Structure to be Served	
<input checked="" type="radio"/> 1. NEW PLUMBING		<input checked="" type="radio"/> 1. SINGLE FAMILY RESIDENCE	
<input checked="" type="radio"/> 2. RELOCATED PLUMBING		2. MODULAR OR MOBILE HOME	
		3. MULTIPLE FAMILY DWELLING	
		4. OTHER-SPECIFY _____	
		Plumbing to be Installed by:	
		<input checked="" type="radio"/> 1. MASTER PLUMBER	
		2. OIL BURNERMAN	
		3. MFG'D HOUSING DEALER / MECHANIC	
		4. PUBLIC UTILITY EMPLOYEE	
		5. PROPERTY OWNER	
		LICENSE # <u>M590014661</u>  <u>Brian Walls</u>	
Hook-Up & Piping Relocation Maximum of 1 Hook-Up		Column 2 Number Type of Fixture	
<input type="checkbox"/> <input type="checkbox"/> HOOK-UP: to public sewer by those cases where the connection is not regulated and inspected by the local sanitary district.		<input type="checkbox"/> <input type="checkbox"/> Hosebib / Sillcock	
		<input type="checkbox"/> <input type="checkbox"/> Floor Drain	
		<input type="checkbox"/> <input type="checkbox"/> Urinal	
		<input type="checkbox"/> <input type="checkbox"/> Drinking Fountain	
		<input type="checkbox"/> <input type="checkbox"/> Indirect Waste	
<input type="checkbox"/> <input type="checkbox"/> HOOK-UP: to an existing subsurface wastewater disposal system		<input type="checkbox"/> <input type="checkbox"/> Water Treatment Softener, Filter, Etc.	
		<input type="checkbox"/> <input type="checkbox"/> Grease / Oil Separator	
		<input type="checkbox"/> <input type="checkbox"/> Roof Drain	
<input type="checkbox"/> <input type="checkbox"/> PIPING RELOCATION: of sanitary lines, drains, and piping without new fixtures.		<input type="checkbox"/> <input type="checkbox"/> Bidet	
		<input type="checkbox"/> <input type="checkbox"/> Other: _____	
		<input type="checkbox"/> <input type="checkbox"/> Fixtures (Subtotal) Column 2	
OR		Column 1 Number Type of Fixture	
		<input type="checkbox"/> <input type="checkbox"/> Bathtub (and Shower)	
		<input type="checkbox"/> <input type="checkbox"/> Shower (separate)	
		<input type="checkbox"/> <input checked="" type="checkbox"/> Sink (new)	
		<input type="checkbox"/> <input type="checkbox"/> Wash Basin	
		<input type="checkbox"/> <input checked="" type="checkbox"/> Water Closet (Toilet) (new)	
		<input type="checkbox"/> <input checked="" type="checkbox"/> Clothes Washer (relocated)	
		<input type="checkbox"/> <input type="checkbox"/> Dish Washer	
		<input type="checkbox"/> <input type="checkbox"/> Garbage Disposal	
		<input type="checkbox"/> <input type="checkbox"/> Laundry Tub	
		<input type="checkbox"/> <input type="checkbox"/> Water Heater	
		<input type="checkbox"/> <input type="checkbox"/> Fixtures (Subtotal) Column 1	
		<input type="checkbox"/> <input type="checkbox"/> Fixtures (Subtotal) Column 2	
		<input type="checkbox"/> <input checked="" type="checkbox"/> 3 TOTAL FIXTURES	
TRANSFER FEE (\$10.00)		<input type="checkbox"/> <input checked="" type="checkbox"/> 40 Fixture Fee	
		<input type="checkbox"/> <input type="checkbox"/> Transfer Fee	
		<input type="checkbox"/> <input type="checkbox"/> Hook-Up & Relocation Fee	
		<input type="checkbox"/> <input checked="" type="checkbox"/> 40 PERMIT FEE (TOTAL)	
		PAGE 1 OF 1	
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